WILLIAM M, MAGILL, Clerk
Melissa Kucserik,
First Assistant Clerk
Rebecca Silbernagel,
Second Assistant Clerk
Jeremy Weiss,
Journal Clerk
Dierdre Allen
Resolution Clerk
Chris Ditmeyer,

Clerk Assistant



House of Representatives State House Montpelier, VT05633-5501 Tel: (802) 828-2247 e-mail: hclerk@leg.state.vt.us

VERMONT HOUSE OF REPRESENTATIVES OFFICE OF THE CLERK

House of Representati	ives Disclo	sure Form		
Name: Lawrence 7. Cupol	-1			
I serve on, or am a member of, the following regulated by law or that receive funding from		ommissions, or	Entities that ar	æ
	Remuneration			
Board, Entity, or Commission Name, and Position (e.g. Board Member, Board Chair)	No	Yes- Only Expenses e.g. mileage	Yes	
hild loverry + Strengthing families Board		/		
hild loverry + Strengthing families Board	/			
	4 - 2 - 45 - 2			
	×-, -			
My Employer: Retired (Salary disclosure not required)				
Signed this 10 th day of January, 201	9			
Lawrence P. Cupoli	and the second			

Printed Name, please sign on back